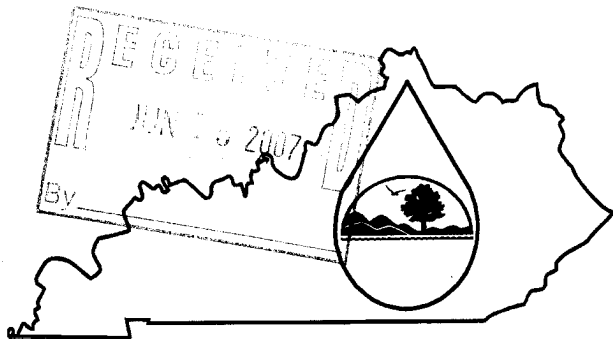


KPDES FORM 1

AI 2108



KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION

This is an application to: (check one)

- ☐ Apply for a new permit.
☐ Apply for reissuance of expiring permit.
☐ Apply for a construction permit.
☐ Modify an existing permit.
 Give reason for modification under Item II.A.

A complete application consists of this form and one of the following:

Form A, Form B, Form C, Form F, or Short Form C

For additional information contact:
KPDES Branch (502) 564-3410

no b rec'd

I. FACILITY LOCATION AND CONTACT INFORMATION		AGENCY USE	0073172
A. Name of business, municipality, company, etc. requesting permit Kentucky Petroleum Recycling Inc.			
B. Facility Name and Location		C. Facility Owner/Mailing Address	
Facility Location Name: Kentucky Petroleum Waste, Inc.		Owner Name: Glenn Shirdliff	
Facility Location Address (i.e. street, road, etc.): 6911 Grade Ln.		Mailing Street: 6911 Grade Lane	
Facility Location City, State, Zip Code: Louisville, Ky. 40213		Mailing City, State, Zip Code: Louisville, Ky. 40213	
		Telephone Number: 502-367-7766	

II. FACILITY DESCRIPTION			
A. Provide a brief description of activities, products, etc: KPR collects and reclaims used oil/fuels. KPR makes an on spec industrial fuel from these used oil/fuels. KPR provides graveyard liability for generators by selling reclaimed oils/fuels for energy recovery. No Hazardous waste is stored at the facility			
B. Standard Industrial Classification (SIC) Code and Description			
Principal SIC Code & Description:	2992		
Other SIC Codes:			

III. FACILITY LOCATION	
A. Attach a U.S. Geological Survey 7 1/2 minute quadrangle map for the site. (See instructions)	
B. County where facility is located: Jefferson	City where facility is located (if applicable):
C. Body of water receiving discharge: North Ditch to Pond Creek 9	
D. Facility Site Latitude (degrees, minutes, seconds): 38 degrees 8 foot 57	Facility Site Longitude (degrees, minutes, seconds): 85 degrees 3 foot 45 inches
E. Method used to obtain latitude & longitude (see instructions): topographical map coordinates	
F. Facility Dun and Bradstreet Number (DUNS #) (if applicable): 06 156 4001	

IV. OWNER/OPERATOR INFORMATION**A. Type of Ownership:**

☐ Publicly Owned ☒ Privately Owned ☐ State Owned ☐ Both Public and Private Owned ☐ Federally owned

B. Operator Contact Information (See instructions)

Name of Treatment Plant Operator:

Glenn Shircliff

Telephone Number:

502-367-7766

Operator Mailing Address (Street):

6911 Grade Lane

Operator Mailing Address (City, State, Zip Code):

Louisville, Ky 40213

Is the operator also the owner?

Yes ☒ No ☐

Is the operator certified? If yes, list certification class and number below.

Yes ☐ No ☒

Certification Class:

Certification Number:

V. EXISTING ENVIRONMENTAL PERMITS

Current NPDES Number:

KY0073172

Issue Date of Current Permit:

11/1/2003

Expiration Date of Current Permit:

Midnight 12/31/2007

Number of Times Permit Reissued:

Date of Original Permit Issuance:

Sludge Disposal Permit Number:

Kentucky DOW Operational Permit #:

NA

Kentucky DSMRE Permit Number(s):

C. Which of the following additional environmental permit/registration categories will also apply to this facility?

CATEGORY	EXISTING PERMIT WITH NO.	PERMIT NEEDED WITH PLANNED APPLICATION DATE
Air Emission Source	11-80-0	
Solid or Special Waste		
Hazardous Waste - Registration or Permit	KYD 061 564 001	

VI. DISCHARGE MONITORING REPORTS (DMRs)

KPDES permit holders are required to submit DMRs to the Division of Water on a regular schedule (as defined by the KPDES permit). The information in this section serves to specifically identify the department, office or individual you designate as responsible for submitting DMR forms to the Division of Water.

A. Name of department, office or official submitting DMRs:

Glenn Shircliff

B. Address where DMR forms are to be sent. (Complete only if address is different from mailing address in Section I.)

DMR Mailing Name:

DMR Mailing Street:

DMR Mailing City, State, Zip Code:

DMR Official Telephone Number:

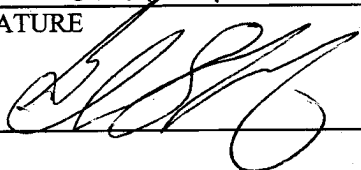
VII. APPLICATION FILING FEE

KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed below and in the Form 1 instructions and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount. Descriptions of the base fee amounts are given in the "General Instructions."

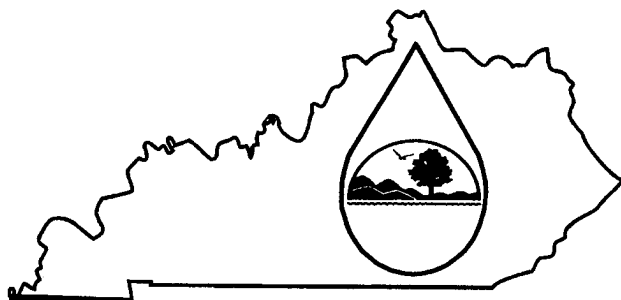
Facility Fee Category: NPIND	Filing Fee Enclosed:
-------------------------------------	----------------------

VIII. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print): Glenn T. Shircliff Vice Pres.	TELEPHONE NUMBER (area code and number): 502-367-7766
SIGNATURE 	DATE: 6-14-07

KPDES FORM SC



KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION

A complete application consists of this form and Form 1.
For additional information, contact: KPDES Branch, (502) 564-3410.

NAME OF FACILITY:							
I. FACILITY DISCHARGE FREQUENCY				AGENCY USE			
A. Do discharge(s) occur all year? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (Complete Item IX for intermittent discharges.)							
B. How many days per week?				Discharge based upon rainfall			
II. A. Give the basis of design for sizing of the wastewater facility (see instructions): The basis of design is to handle stormwater runoff from 3 sections of containment for a tank farm (AST)'s Total square foot of stormwater containment is 10,838.							
B. If new discharger, indicate anticipated discharge date:							
C. Indicate the design capacity of the treatment system:				MGD Handle daily rainfall maximum capacity 3" line gravity fed.			
III. Outfall Location (see instructions)							
Outfall (list)	LATITUDE			LONGITUDE			RECEIVING WATER (name)
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	
	38	9'		85	3'	45"	Northern Ditch
Method used to obtain latitude/longitude (i.e. GPS unit, USGS topographic map coordinates, etc.)				USGS Topographical Map Coordinates			

IV. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES (see instructions)

If wastewater other than domestic or sanitary is listed, complete page 4 in addition to page 1 and 2.

OUTFALL NO. (list)	OPERATION(S) CONTRIBUTING FLOW		TREATMENT	
	Operation (list)	Avg/Design Flow (include units)	List treatment components	List Codes from Table SC-1
A	Stormwater		oil/water separator oil skimmer/microbes + aeration	

V. Check the type(s) of wastewater discharged.☐ Domestic (60% or more sanitary sewage)☐ Oil field waste☐ Noncontact cooling water☒ Other (list):

Stormwater

VI. Does all water used at facility (except for human consumption) flow to a treatment plant? ☐ Yes ☒ No**VII. Discharge to other than surface waters. Check appropriate location:**☐ Publicly-owned lake or impoundment

Name of lake:

☐ Publicly-owned treatment works (POTW).

Name of POTW:

☐ Land application of Effluent☐ Surface injection (Check term and identify on map) ☐ lateral field; ☐ sinkhole; ☐ sinking stream; ☐ deep well☐ Closed Circuit (Check appropriate term) ☐ Holding tank; ☐ Mechanical evaporation; ☐ Waste impoundment**VIII. Check the metals present in the discharge if applicable and indicate the quantity discharged per year. (Indicate units).**

<input type="checkbox"/>	Antimony	
<input type="checkbox"/>	Arsenic	
<input type="checkbox"/>	Beryllium	
<input type="checkbox"/>	Cadmium	
<input type="checkbox"/>	Chromium	

<input type="checkbox"/>	Copper	
<input type="checkbox"/>	Lead	
<input type="checkbox"/>	Mercury	
<input type="checkbox"/>	Nickel	
<input type="checkbox"/>	Selenium	

<input type="checkbox"/>	Silver	
<input type="checkbox"/>	Thallium	
<input type="checkbox"/>	Zinc	
<input type="checkbox"/>		
<input type="checkbox"/>		

IX. INTERMITTENT DISCHARGES (Complete this section for intermittent discharges.)		
A. Number of bypass points:	1	(If bypass points are indicated, information below must be completed for each bypass.)

Check when bypass occurs:	<input checked="" type="checkbox"/> Wet Weather	<input type="checkbox"/> Dry Weather
Give the number of bypass incidents	42 per year	per year
Give average duration of bypass	1-3 hours	hours
Give average volume per incident	1.8 inches 1,000 gallons	1,000 gallons
Give reason why bypass occurs:	Precipitation	

B. Number of Overflow Points: (If discharge is from an overflow point, the information below must be completed.)		
Check when overflow occurs:	<input type="checkbox"/> Wet Weather	<input type="checkbox"/> Dry Weather
Give the number of overflow incidents:	NA per year	per year
Give average duration of overflow:	hours	hours
Give average volume per incident:	1,000 gallons	1,000 gallons

C. Number of seasonal discharge points	
Give the number of times discharge occurs per year	42
Give the average volume per discharge occurrence	1.8 (1,000 gallons)
Give the average duration of each discharge	(days) 1-3 Hrs
List month(s) when the discharge occurs	All

X. AREA SERVED (see instructions)	
NAME	ACTUAL POPULATION SERVED
Kentucky Petroleum Recycling Inc.	(AST) tank farm
TOTAL POPULATION SERVED	

(PLEASE COMPLETE THIS PAGE IF OTHER THAN DOMESTIC WASTEWATER IS DISCHARGED)

XL. COOLING WATER ADDITIVES AND THEIR COMPOSITIONS

Additive	Composition	Concentration (mg/l)
Devour	Hydrocarbon eating microbe	1 qt / separator
Vindicator	Breaks hydrocarbons from walls	1 qt separator

XII. EFFLUENT CHARACTERISTICS

A. Indicate results of analysis for pollutants listed below.

POLLUTANT/PARAMETER	MAX DAILY VALUE	AVG DAILY VALUE	NUMBER OF SAMPLES
BOD ₅	286		
TOTAL SUSPENDED SOLIDS	41		
FECAL COLIFORM	2300/100 mL		
TOTAL RESIDUAL CHLORINE	0.01		
OIL AND GREASE	21		
CHEMICAL OXYGEN DEMAND	488		
TOTAL ORGANIC CARBON	1100		
AMMONIA	2		
DISCHARGE FLOW	1000 gal/day		
PH	6.23		
TEMPERATURE (WINTER)	53°		
TEMPERATURE (SUMMER)	58°		

B. Frequency and duration of flow:

Seasonal. according to amount of rainfall

XIII. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

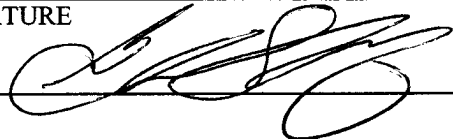
NAME AND OFFICIAL TITLE (type or print):

Glenn T. Shircliff

TELEPHONE NUMBER (area code and number):

502-367-7766

SIGNATURE



DATE

6-14-07



ERNIE FLETCHER
GOVERNOR

ENVIRONMENTAL AND PUBLIC PROTECTION CABINET
DEPARTMENT FOR ENVIRONMENTAL PROTECTION
DIVISION OF WATER
14 REILLY ROAD
FRANKFORT, KENTUCKY 40601
www.kentucky.gov

TERESA J. HILL
SECRETARY

May 31, 2007

Mr. Glenn T. Shircliff
KY Petroleum Waste, Incorporated
6911 Grade Lane
Louisville, Kentucky 40213

RE: KPDES No. KY0073172
KY Petroleum Waste, Incorporated
Jefferson County, Kentucky

Dear Mr. Shircliff:

Our records indicate that your Kentucky Pollutant Discharge Elimination System (KPDES) permit is due to expire on December 31, 2007. According to the KPDES Regulation 401 KAR 5:060, "any person with a currently effective permit shall submit a new application at least 180 days before the expiration of the existing permit..." **The due date for your permit renewal application is July 5, 2007.**

Please complete the enclosed application forms and return to the KPDES Branch, Division of Water, at the above address by the indicated due date. Applications received after the due date are in violation of 401 KAR 5:060, Section 1, which could result in enforcement action being taken.

If you have any questions regarding the completion of these forms, please contact me at (502) 564-8158, extension 470, or Ann Workman at extension 528.

Sincerely,

Vickie L. Prather, Acting Supervisor
Inventory and Data Management Section
KPDES Branch
Division of Water

VLP:ASW:asw

Enclosures

C: Louisville Regional Office
Division of Water Files

Grade Lane

DRIVEWAY

DITCH

BUMP

Drain

OFFICE

SHOP

ELEC.

ELEC.

BOILER

GAS Propane

AID

DIV

RAINWATER DISCHARGE VALVE

O/W SER

ELEC.

O/W SER

SKID

PUMP STATION

PUMP STATION

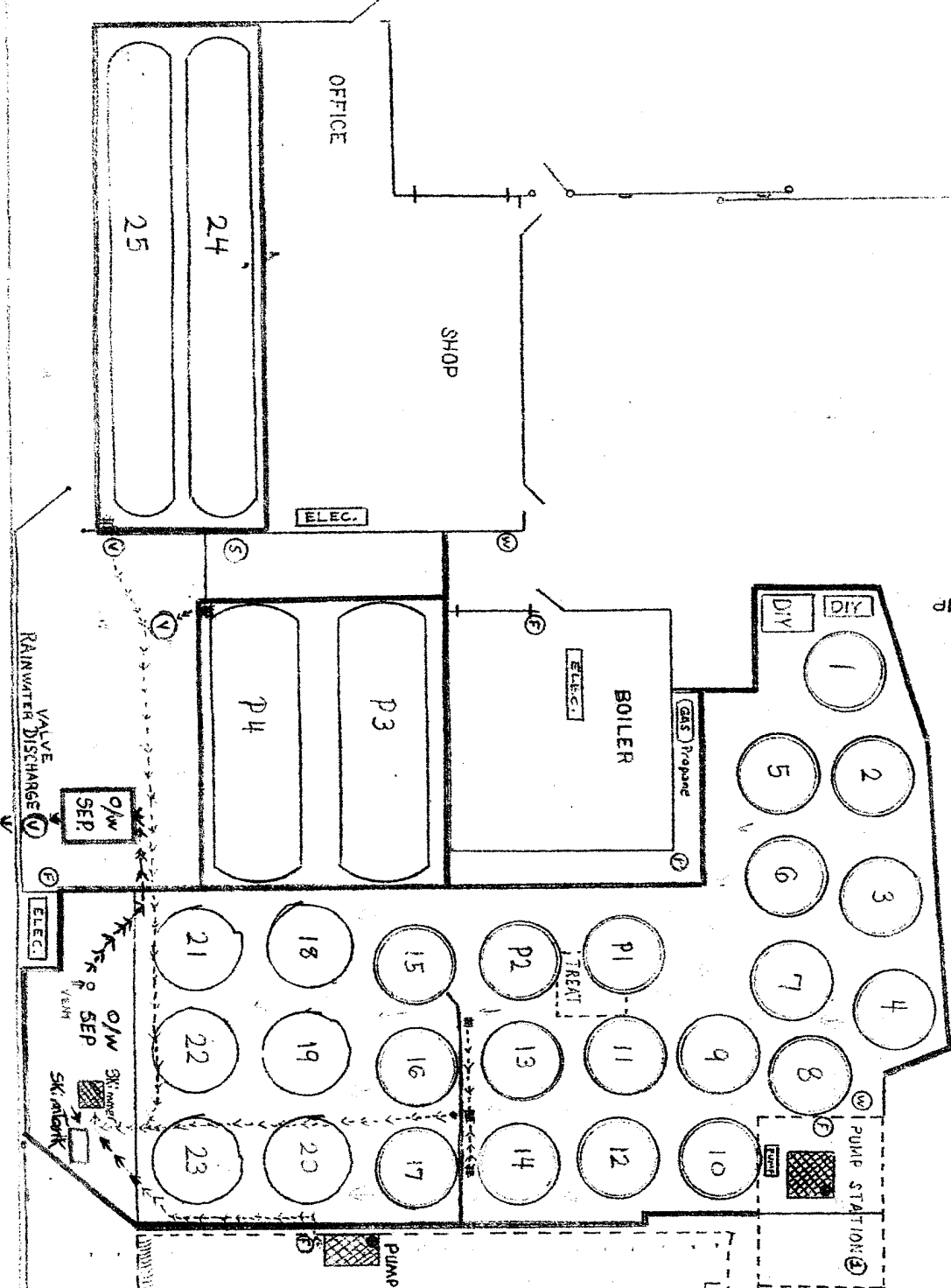
LOADING AREA

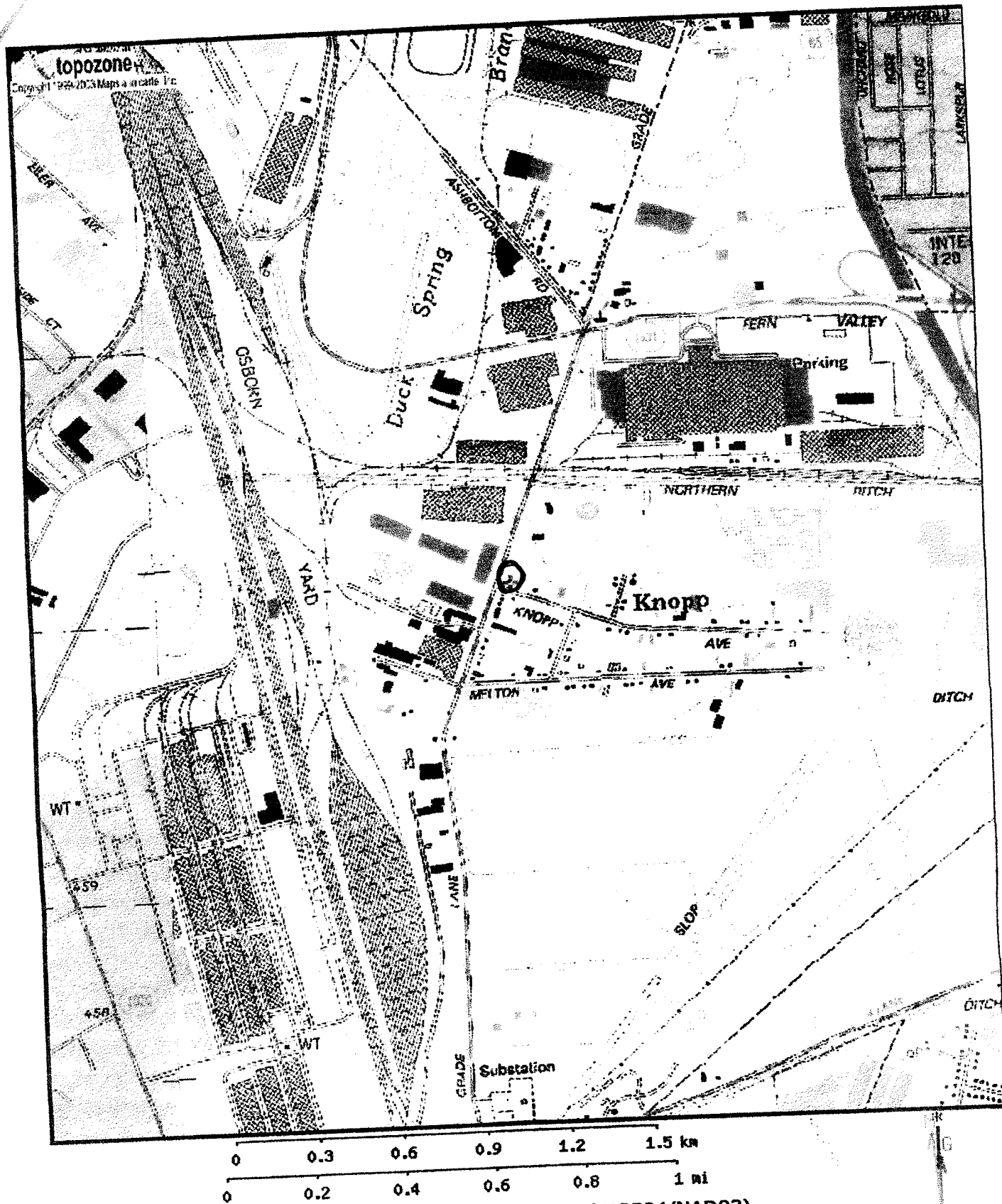
Containment 10,838 sq ft

Stormwater

Knopp Ave

KPR





Map center is 38° 08' 57"N, 85° 44' 08"W (WGS84/NAD83)
Louisville East quadrangle

Projection is UTM Zone 16 NAD83 Datum

K=3.013
G=0.781